

POLICY STATEMENT

Date: August 12, 2002
To: Sources of Aquatic Animals to Utah
From: Michael R. Marshall DVM,
State Veterinarian, Director, Division of Animal Industry
Subject: Requirements for Shipments from Zebra Mussel Endemic Areas

To satisfy import requirements, all suppliers of aquatic animals to be shipped into Utah from areas endemic to the zebra mussel *Dreissena polymorpha* shall follow this protocol prior to the shipment of water and/or aquatic animals to Utah.

Conditions requiring treatment:

1. The supplier's hatchery facilities are located within 100 miles of waters containing the zebra mussel;
2. The aquatic animals at the hatchery facilities have been reared in open water supplies (non well water) during one or more life stages;
3. Since veligers, the mussel's microscopic larval form, may be associated with the fish, treatment is required even when the fish are to be transported in well water;
4. Treatment is required even if no dreissenids have been shown to be present at the facility in question;
5. The shipment poses a risk to the aquaculture industry and/or natural resources of Utah.

Treatment protocol* and verification notice:

1. One (1) hour pretreatment of the fish and transport water with 750 mg/L potassium chloride (KCl)(0.63 lb of KCl per 100 gallons of water) followed by a two (2) hour treatment of the fish in the same transport water with 25 mg/L formalin (9.5 ml or 0.33 fluid oz of 37% formaldehyde per 100 gallons of water);
2. Placement of treated fish in treated fish transport tanks containing mussel-free well water;
3. Complete, sign, and fax (801-538-4949) the attached Notice of Treatment for Zebra Mussel to Agriculture;
4. Following review of this Notice, Agriculture will contact the transport and/or hatchery manager regarding the transport.

If you have any questions, contact our office at 801-538-7029.

*Reference: Edwards, WJ, Babcock-Jackson, L, DA Culver. 2002. Field testing of protocols to prevent the spread of zebra mussels *Dreissena polymorpha* during fish hatchery and aquaculture activities. NA Journal of Aquaculture 64:220-223.

AKH/MM: kmb

State of Utah
Department of Agriculture and Food
Fish Health Program
(801) 538-7029

NOTICE OF TREATMENT FOR ZEBRA MUSSEL

Owner or Exporter _____

Address _____

Phone/Fax _____

Current Utah Fish Health Approval Number _____

Species, size/age, and number of aquatic animals to be treated prior to export into Utah

I verify to the best of my knowledge that the zebra mussel is not found within 100 miles of my facility.

Signed _____ Date _____

If so, name of watershed infested with zebra mussel, which is closest to your facility

Distance of above watershed from your facility _____

I, the undersigned, certify that the treatment of the above listed fish for the zebra mussel was conducted by me on (date) _____ according to Utah policy.

Signed _____ Date _____

I, the undersigned, certify that the above-listed fish were not treated for the zebra mussel for the following reasons:

- ☐ The zebra mussel is not located at my farm;
- ☐ The fish to be exported to Utah were reared for all life stages in well water, which is free of the zebra mussel;
- ☐ The fish will be shipped to Utah in well water free of the zebra mussel;

☐ Other (specify) _____

Signed _____ Date _____